

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF

Julian A. Miller

COURT CASE NUMBER

04-1367 KAJ

DEFENDANT

TYPE OF PROCESS

Order/Complaint

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Attorney General

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

820 North French Street Wilmington, Delaware 19801

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Julian A. Miller
393626 D-East
1181 paddock Road
Smyrna, Delaware 19977

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

5

Check for service on U.S.A.

2005

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

PAUPER CASE

Signature of Attorney or other Originator requesting service on behalf of:

Julian A. Miller

 PLAINTIFF
 DEFENDANT

TELEPHONE NUMBER

DATE

33-05

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

District to Serve

Signature of Authorized USMS Deputy or Clerk

Date

5-3-05

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below.)

Name and title of individual served (if not shown above)

Malcolm Cobin - State Solicitor

 A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service Time am

5/17/05 1410 pm

Signature of U.S. Marshal or Deputy

ST Miller

| Service Fee | Total Mileage Charges (including endeavors) | Forwarding Fee | Total Charges | Advance Deposits | Amount owed to U.S. Marshal or | Amount of Refund |
|-------------|--|----------------|---------------|------------------|--------------------------------|------------------|
| | | | | | | |

REMARKS: